

NW claim

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1ST AMENDMENT | | AFTER 2ND AMENDMENT | |
|--------------|----------|-----|---------------------|-----|---------------------|-----|
| | IND | DEP | IND | DEP | IND | DEP |
| 1 | 1 | | | | | |
| 2 | | 1 | | | | |
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| 5 | | 2 | | | | |
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| 9 | | 2 | | | | |
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| TOTAL IND. | 3 | | | | | |
| TOTAL DEP. | 29 | | | | | |
| TOTAL CLAIMS | 32 | | | | | |

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| TOTAL IND. | | | | | | |
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Cancelled claim

Page 1

| MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET | | | | | | | SERIAL NO. | FILING DATE | | | | | |
|---------------------------------------------------|----------|-----|---------------------|-----|---------------------|-----|--------------|-------------|-----|-----|-----|-----|-----|
| | | | | | | | APPLICANT(S) | | | | | | |
| CLAIMS | | | | | | | | | | | | | |
| | AS FILED | | AFTER 1ST AMENDMENT | | AFTER 2ND AMENDMENT | | | | | | | | |
| | IND | DEP | IND | DEP | IND | DEP | | IND | DEP | IND | DEP | IND | DEP |
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page 2

| MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET | | | | | | | SERIAL NO. | FILING DATE | |
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